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**CERTIFICATE OF FACSIMILE TRANSMISSION TO THE  
 UNITED STATES PATENT AND TRADEMARK OFFICE**
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 Date: *March 29, 2004*

*Examiner: Thuy V. Tran*  
*Art Unit: 2821*  
*Fax: (703) 872-9306*  
*From: Patrick W. Rasche*

: *RE: U.S. Patent Application*  
 : *Serial No.: 09/997,705*  
 : *Applicant: Sergio A. Vinocur, et al.*  
 : *Atty. Dkt. No.: 9D-HR-19788*

MAR 29 2004

**OFFICIAL**
**DOCUMENTS SUBMITTED WITH TRANSMISSION:**

*Amendment Transmittal (3 pgs.); Amendment in Response to Final Office Action dated (*  
*pgs.); Submission of Marked Up Claims (pgs.)*

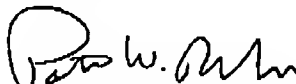
*Total pages including cover page:*

*If all pages are not received, please contact: Michele at Ext. 7321*

*RE: The above referenced U.S. Patent Application*  
*Title: APPARATUS AND METHOD FOR OPERATING AN APPLIANCE LIGHT*  
*Filed: November 30, 2001*

**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that these papers are being facsimile transmitted to the U.S. Patent and Trademark Office,  
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 Date: March 29, 2004


Patrick W. Rasche, Reg. No.: 37,916

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PATENT

Attorney Docket No.: 9DHR-19788

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Sergio A. Vinocur, et al.

Group Art Unit: 2821

Serial Number: 09/997,705

Examiner: Tran, Thuy V.

Filed: November 30, 2001

For: APPARATUS AND METHOD FOR  
OPERATING AN APPLIANCE LIGHTMail Stop: AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

## TRANSMITTAL

1. Transmitted herewith is: Amendment in response to Final Office Action dated January 28, 2004 (9 pgs.); and Certificate of Transmission via Facsimile

## STATUS

2. Applicant  
☒ claims small entity status.  
☐ is other than a small entity.

## CERTIFICATE OF MAILING/TRANSMISSION

CERTIFICATE OF MAILING BY EXPRESS MAIL TO  
THE COMMISSIONER FOR PATENTS

## FACSIMILE

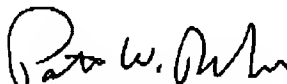
Express Mail No.: ELUS

Date:

I hereby certify that the documents listed above are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above in an envelope addressed to: Mail Stop: , Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: March 29, 2004

✓ transmitted by facsimile to the Patent and Trademark Office  
Via Facsimile: (703) 872-9306

Patrick W. Rasche  
Reg No.: 37,916

**EXTENSION OF TERM**

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) \_\_\_\_\_ Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
_____ first month	\$ 110.00	\$ 5.00
_____ second month	\$ 420.00	\$ 210.00
_____ third month	\$ 950.00	\$ 475.00
_____ fourth month	\$1,480.00	\$ 740.00
_____ fifth month	\$2,010.00	\$1,005.00

Fee: \$ \_\_\_\_\_

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

\_\_\_\_\_ An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$ \_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ \_\_\_\_\_

OR

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

**FEE FOR CLAIMS**

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

		(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL RATE FEE		ADDITIONAL RATE FEE
TOTAL INDEP.	20	MINUS	20	=0	x \$9 = \$		x \$18 = \$0
	5	MINUS	3	=2	x \$43 = \$		x \$86 = \$172.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$145 = \$		+ \$290 = \$
					TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$172.00

- (a) ☐ No additional fee for Claims is required

OR

- (b) ☒ Total additional fee for claims required \$172.00

**FEE PAYMENT**

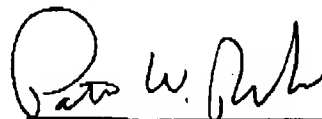
5. ☐ Attached is a check in the sum of \$\_\_\_\_\_
- ☒ Charge Deposit Account No. 01-2384 the sum of \$172.00.  
A duplicate of this transmittal is attached.

**FEE DEFICIENCY**

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

- ☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.
7. ☐ Other:



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